



KENTUCKY APPLICATION FOR DEALER LOANER/RENTAL VEHICLE TAX

FOR OFFICIAL USE ONLY

Mail completed application to the Kentucky Revenue Cabinet,
Miscellaneous Tax Section, Station 59, Frankfort, KY 40619

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|--------------------------------|
| Name of Business | Enter Legal Name | Current MVC Dealer Number | |
| Location of Business | | | |
| | Number and Street | City | County State ZIP Code |
| Mailing Address | | | |
| | P.O. Box or Number and Street | City | County State ZIP Code |
| Business Information | Account Number | | |
| | () — Telephone Number | Kentucky Employer's Withholding _____ | |
| | () — Fax Number | Kentucky Corporation Income and License _____ | |
| | — | Kentucky Sales and Use _____ | |
| | Federal Employer I.D. Number | Kentucky Unemployment Insurance _____ | |
| Owner Information | Name of Owner | Title | Social Security Number or FEIN |
| | | | |
| | Home Address | | Telephone Number |
| | | | |
| | Name of Co-Owner | Title | Social Security Number or FEIN |
| | | | |
| | Home Address | | Telephone Number |
| | | | |
| Contact Person | | () — | |
| | Contact Name | Contact Telephone Number | Contact E-Mail Address |
| Eligibility | <p>1. Does your dealership furnish repair services to your customers? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Do you loan or rent vehicles to the customers while repairing their vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, stop, sign and return this application to the Kentucky Revenue Cabinet. If yes, continue.</p> <p>3. Submit a list of the vehicles you use as loaners/rentals on the reverse of this form.</p> | | |
| The above statements are hereby certified to be correct to the best knowledge and belief of the undersigned who is duly authorized to sign this application. | | | |
| Signature of Owner or Partner (If a corporation, an officer must sign.) | | Title | Date |

Vehicles used as Loaners/Rentals

| Line # | Vehicle Identification Number | Year | Make | Model |
|--------|-------------------------------|------|------|-------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| 11 | | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | | | | |
| 15 | | | | |
| 16 | | | | |
| 17 | | | | |
| 18 | | | | |
| 19 | | | | |
| 20 | | | | |
| 21 | | | | |
| 22 | | | | |
| 23 | | | | |
| 24 | | | | |
| 25 | | | | |
| 26 | | | | |
| 27 | | | | |
| 28 | | | | |
| 29 | | | | |